Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 1 of 49

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF ILLINOIS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your	Paloma First name M Middle name Cruz Lopez Last name and Suffix (Sr., Jr., II, III)	First name Middle name
	meeting with the trustee.	Last name and Sumx (Sr., Sr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.	Paloma Cruz Paloma Lopez	
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-2142	

Entered 03/31/16 16:11:42 Desc Main Page 2 of 49 Case 16-11190 Doc 1 Filed 03/31/16 Document

Debtor 1 Paloma M Cruz Lopez

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	955 Westmoreland Drive Apt #24	If Debtor 2 lives at a different address:
		Vernon Hills, IL 60061 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Lake	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing	Check one:	Check one:
	this district to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 3 of 49

Debtor 1 Paloma M Cruz Lopez

Case number (if known)

ar	t 2: Tell the Court About	Your B	ankruptcy Ca	se					
7. The chapter of the Bankruptcy Code you are choosing to file under		iling for Bankruptcy							
	choosing to file under	■ Chapter 7							
		□с	hapter 11						
		□с	hapter 12						
		□с	hapter 13						
3.	How you will pay the fee	•	about how yo	u may pay. Ty attorney is su	pically, if you a	re paying the t	fee yourself, you r	erk's office in your local may pay with cash, cash rney may pay with a cre	nier's check, or money
							s option, sign and	attach the Application for	or Individuals to Pay
			I request tha	t my fee be w		y request this		are filing for Chapter 7. s less than 150% of the	
								s). If you choose this op 3B) and file it with your p	
9.	Have you filed for bankruptcy within the	■ No							
	last 8 years?	☐ Ye	es.						
			District						
			District			When		Case number	
			District			_ When		Case number	
10.	Are any bankruptcy cases pending or being	■ No)						
	filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Ye	es.						
			Debtor					Relationship to you	
			District			When		Case number, if knowr	າ
			Debtor					Relationship to you	
			District			_ When		Case number, if knowr	1
11.	Do you rent your residence?	■ No	Go to li	ne 12.					
	. Coluction .	□Ye	es. Has yo	ur landlord ob	tained an evict	on judgment a	against you and do	you want to stay in you	ur residence?
				No. Go to line	e 12.				
				Yes. Fill out bankruptcy p		t About an Evi	ction Judgment A	gainst You (Form 101A)	and file it with this

Page 4 of 49 Case number (if known) Debtor 1 Paloma M Cruz Lopez

ar	Report About Any Bu	sinesses `	You Own	as a Sole Proprietor			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.			
		☐ Yes.	Name	and location of business			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	Name of business, if any			
	If you have more than one sole proprietorship, use a separate sheet and attach		Numbe	Number, Street, City, State & ZIP Code			
	it to this petition.		Check	the appropriate box to describe your business:			
				Health Care Business (as defined in 11 U.S.C. § 101(27A))			
				Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))			
				Commodity Broker (as defined in 11 U.S.C. § 101(6))			
				None of the above			
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadlines operation	s. If you inc s, cash-flo	filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of , cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure C. 1116(1)(B).			
	For a definition of small	■ No.	I am n	ot filing under Chapter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am fil Code.	ling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy			
		☐ Yes.	I am fil	I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any Property That Needs Immediate Attention			
4.	Do you own or have any	■ No.					
	property that poses or is alleged to pose a threat of imminent and	■ No. ☐ Yes.	What is t	he hazard?			
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			iate attention is why is it needed?			
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Number, Street, City, State & Zip Code			

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 5 of 49

Debtor 1 Paloma M Cruz Lopez

a M Cruz Lopez Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

Explain Your Efforts to Receive a Briefing About Credit Counseling

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Document Page 6 of 49 Case number (if known) Debtor 1 Paloma M Cruz Lopez Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ■ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under I am not filing under Chapter 7. Go to line 18. ☐ No. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do 1-49 **1**,000-5,000 **1** 25,001-50,000 you estimate that you **5001-10,000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you □ \$1,000,001 - \$10 million □ \$500,000,001 - \$1 billion \$0 - \$50,000 estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Part 7: Sign Below For you I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11. United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Paloma M Cruz Lopez Signature of Debtor 2 Paloma M Cruz Lopez

Executed on

MM / DD / YYYY

Signature of Debtor 1

Executed on March 31, 2016

MM / DD / YYYY

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 7 of 49

Debtor 1 Paloma M Cruz Lopez

Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Brittany	Helfer	Date	March 31, 2016	
Signature of	Attorney for Debtor		MM / DD / YYYY	
Brittany He	elfer			
Printed name				
Albarran La	aw Offices			
Firm name				-
204 N. Wes	st Street			
Waukegan	, IL 60085			
Number, Street, 0	City, State & ZIP Code			
Contact phone	874-782-1111	Email address	albarranlaw@yahoo.com	
6311064				
Bar number & Sta	ate			

			.III I auc o o 43	
Fill in this infor	mation to identify your	case:		
Debtor 1	Paloma M Cruz L	opez		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your as	ssets f what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	11,159.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	11,159.00
Pa	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	33,591.75
	Your total liabilities	\$	33,591.75
Pa	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	423.37
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,080.00
Pa	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sch	nedules.
7.	■ Yes What kind of debt do you have?		
7.	— 122	a personal,	family, or

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Entered 03/31/16 16:11:42 Desc Main Case 16-11190 Doc 1 Filed 03/31/16 Document

Page 9 of 49 Case number (if known) Debtor 1 Paloma M Cruz Lopez

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

1,524.10

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total	claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Page 10 of 49 Document Fill in this information to identify your case and this filing: Debtor 1 Paloma M Cruz Lopez Middle Name First Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF ILLINOIS Case number Check if this is an amended filing Official Form 106A/B Schedule A/B: Property 12/15 In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property? No. Go to Part 2. ☐ Yes. Where is the property? **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ■ No ☐ Yes 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No □ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$0.00 pages you have attached for Part 2. Write that number here..... Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No Yes. Describe.....

7. Electronics

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

Renter (shares with a roommate): 2 beds, 2 dressers, 1 TV stand,

coffee table, couch, kitchen table and chairs

☐ No

Official Form 106A/B Schedule A/B: Property page 1

\$1,000.00

		esc Main
Debtor 1	Paloma M Cruz Lopez Document Page 11 of 49 Case number (if known)	
■ Yes	. Describe	
	1 32" TV, cell phone, lap top (purchased two years ago for \$200)	\$250.00
Examp ■ No	 ibles of value oles: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or other collections, memorabilia, collectibles Describe 	baseball card collections;
Examp ■ No	nent for sports and hobbies bles: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and musical instruments . Describe	kayaks; carpentry tools;
■ No	ms nples: Pistols, rifles, shotguns, ammunition, and related equipment Describe	
☐ No	es uples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Describe	
	Necessary wearing apparel	\$200.00
□ No	ry aples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold . Describe	, silver
	Costume jewelry	\$25.00
Exam No □ Yes. 14. Any o ■ No	arm animals uples: Dogs, cats, birds, horses Describe ther personal and household items you did not already list, including any health aids you did not list Give specific information	
	the dollar value of all of your entries from Part 3, including any entries for pages you have attached Part 3. Write that number here	\$1,475.00
101 1		
Part 4: De	escribe Your Financial Assets wn or have any legal or equitable interest in any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 12 of 49 Case number (if known) Debtor 1 Paloma M Cruz Lopez 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... **Bank of America** \$100.00 17.1. Checking **PNC Bank** \$25.00 17.2. Checking **PNC Bank** \$10.00 Savings 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans ■ No ☐ Yes. List each account separately. Type of account: Institution name: 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others □ No Institution name or individual: ■ Yes. Rental deposit **Security Deposit for Apartment** \$900.00

23. **Annuities** (A contract for a periodic payment of money to you, either for life or for a number of years)

No

24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit

■ No☐ Yes. Give specific information about them...

De		se 16-11190 oma M Cruz Lope		Filed 03/31/16 Document	Entered 03/31 Page 13 of 49 _C	/16 16:11:42 ase number (if known)	Desc Main
26				ets, and other intellectu	al property	, ,	
_0.	Examples: In			proceeds from royalties a		s	
	■ No		la a				
	☐ Yes. Give s	specific information a	bout them				
27.		nchises, and other uilding permits, exclu		angibles s, cooperative association	n holdings, liquor license	es, professional license	es
	☐ Yes. Give	specific information a	bout them				
M	oney or prope	rty owed to you?					Current value of the
							portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ☐ No	owed to you					
	Yes. Give s	pecific information at	oout them, in	cluding whether you alrea	ady filed the returns and	I the tax years	
			201	5 Federal Tax Refund spent on attorney's rent and security de apartment, and boug kids. Total was \$7,9 that was earned inco \$1,730 was child tax	rees, first month's posit at new ght clothes for her 86 and \$5,548 of ome credit ad	Federal	\$7,986.00
							*
			201	5 Illinois Tax Refund,	already filed.	State	\$663.00
	■ No		, ,	ousal support, child suppo	ort, maintenance, divorc	e settlement, property	settlement
30.	Examples: U	nts someone owes y npaid wages, disabili enefits; unpaid loans	ty insurance	payments, disability bene someone else	efits, sick pay, vacation	pay, workers' comper	nsation, Social Security
	■ No						
	☐ Yes. Give	specific information					
31.	Examples: H	nsurance policies ealth, disability, or life	e insurance;	health savings account (I	HSA); credit, homeowne	er's, or renter's insurar	nce
	Examples: H ■ No	ealth, disability, or life		,	HSA); credit, homeowne	er's, or renter's insurar	nce
	Examples: H ■ No	ealth, disability, or life the insurance compa		health savings account (be policy and list its value.	HSA); credit, homeowne Beneficiary		Surrender or refund value:
	Examples: H No Yes. Name Any interest If you are the someone has	ealth, disability, or life the insurance compa Com in property that is described to the compact of the compact	any of each p pany name: lue you fron	,	Beneficiary	r:	Surrender or refund value:
32.	Examples: H No Yes. Name Any interest If you are the someone has	ealth, disability, or life the insurance compa Com in property that is do beneficiary of a livin s died.	any of each p pany name: lue you fron	policy and list its value. In someone who has die	Beneficiary	r:	Surrender or refund value:
32.	Examples: H No Yes. Name Any interest If you are the someone has	ealth, disability, or life the insurance compa Com in property that is described to the compact of the compact	any of each p pany name: lue you fron	policy and list its value. In someone who has die	Beneficiary	r:	Surrender or refund value:
32.	Examples: H No Yes. Name Any interest If you are the someone has No Yes. Give s Claims again Examples: A	the insurance compa Com in property that is dependent of a living a died. specific information	any of each p pany name: lue you fron g trust, expe	policy and list its value. In someone who has die	Beneficiary d surance policy, or are contact or made a demand for	r: urrently entitled to rece	Surrender or refund value:

		iled 03/31/16		3/31/16 16:11:42	Desc Main
Deb		Document	Page 14 of	Case number (if known)	
_	other contingent and unliquidated claims of even No	ery nature, including	g counterclaims (of the debtor and rights to	set off claims
	Yes. Describe each claim				
35. /	ny financial assets you did not already list				
	No				
	Yes. Give specific information				
36	Add the dollar value of all of your entries from	Part 4 including a	ny entries for nac	ies vou have attached	
00.	for Part 4. Write that number here				\$9,684.00
	_				
Part	Describe Any Business-Related Property You Own	n or Have an Interest I	n. List any real esta	ite in Part 1.	
37. D	o you own or have any legal or equitable interest in a	ny business-related p	roperty?		
	No. Go to Part 6.				
	Yes. Go to line 38.				
Part	Describe Any Farm- and Commercial Fishing-Rela If you own or have an interest in farmland, list it in Par		n or Have an Interes	st In.	
46 [o you own or have any legal or equitable intere	et in any farm- or (commorcial fishin	ag-rolated property?	
	■ No. Go to Part 7.	ist iii ariy lariii- Or C	Johnner Clai Hishii	ig-related property:	
	☐ Yes. Go to line 47.				
Part	7: Describe All Property You Own or Have an In	terest in That You Dic	l Not List Above		
50 F	a van bana athan mananto af ann bind nan did	mat almandu lint?			
	o you have other property of any kind you did Examples: Season tickets, country club membersh				
	No				
	Yes. Give specific information				
54.	Add the dollar value of all of your entries from	Part 7. Write that n	umber here		\$0.00
Dont	List the Totale of Each Bort of this Form				
Part	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$0.00
56.	Part 2: Total vehicles, line 5	_	\$0.00		
57.	Part 3: Total personal and household items, lir	ne 15	\$1,475.00		
58.	Part 4: Total financial assets, line 36	_	\$9,684.00		
59.	Part 5: Total business-related property, line 45	·	\$0.00		
60.	Part 6: Total farm- and fishing-related property	, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 67	l	\$11,159.00	Copy personal property to	otal \$11,159.00
63.	Total of all property on Schedule A/B. Add line	55 + line 62			\$11,159.00

Official Form 106A/B Schedule A/B: Property page 5

			111 T AUC 13 UI 43	
Fill in this infor	mation to identify your	case:		
Debtor 1	Paloma M Cruz L	opez		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the	Property	You	Claim	as	Exempt
---------	----------	-----	-----------------	-----	-------	----	--------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Renter (shares with a roommate): 2 beds, 2 dressers, 1 TV stand, coffee	\$1,000.00		\$1,000.00	735 ILCS 5/12-1001(b)
table, couch, kitchen table and chairs Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
1 32" TV, cell phone, lap top (purchased two years ago for \$200)	\$250.00		\$250.00	735 ILCS 5/12-1001(b)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Necessary wearing apparel Line from Schedule A/B: 11.1	\$200.00		100%	735 ILCS 5/12-1001(a)
Life Holl Golleddie AVD. 1111			100% of fair market value, up to any applicable statutory limit	
Costume jewelry	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
Elite Hotil Geriedale Av.D. 12.1			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of America Line from Schedule A/B: 17.1	\$100.00		\$100.00	735 ILCS 5/12-1001(b)
LITE TOTAL SCREAME A/B. 11.1			100% of fair market value, up to any applicable statutory limit	

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 16 of 49

Deb	tor 1 Paloma M Cruz Lopez			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Checking: PNC Bank Line from Schedule A/B: 17.2	\$25.00		\$25.00	735 ILCS 5/12-1001(b)
	Line Holli Schedule A/B. 11.2			100% of fair market value, up to any applicable statutory limit	
	Savings: PNC Bank Line from Schedule A/B: 17.3	\$10.00		\$10.00	735 ILCS 5/12-1001(b)
	Ellie Holli Govedale 775.			100% of fair market value, up to any applicable statutory limit	
	Rental deposit: Security Deposit for Apartment	\$900.00		\$900.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 22.1			100% of fair market value, up to any applicable statutory limit	
	Federal: 2015 Federal Tax Refund, already filed and spent on attorney's	\$7,986.00		\$7,278.00	735 ILCS 5/12-1001(g)(1)
	fees, first month's rent and security deposit at new apartment, and bought clothes for her kids. Total was \$7,986 and \$5,548 of that was earned income credit ad \$1,730 was child tax c Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	Federal: 2015 Federal Tax Refund, already filed and spent on attorney's	\$7,986.00		\$1,027.00	735 ILCS 5/12-1001(b)
	fees, first month's rent and security deposit at new apartment, and bought clothes for her kids. Total was \$7,986 and \$5,548 of that was earned income credit ad \$1,730 was child tax c Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
	State: 2015 Illinois Tax Refund, already filed.	\$663.00		\$663.00	735 ILCS 5/12-1001(b)
	Line from Schedule A/B: 28.2			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/16 and every 3 ■ No □ Yes. Did you acquire the property covere □ No □ Yes	Byears after that for ca	ises fi	,	,

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 17 of 49

Fill in this infor	rmation to identify your	case:		
Debtor 1	Paloma M Cruz L	opez		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

	0000 10 11100 1	Document Document	Page 18	3 of 49	Desc Main
Fill in this	information to identify your				
Debtor 1	Paloma M Cruz Lo	opez			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing	g) First Name	Middle Name	Last Name		
	. ,				
United State	es Bankruptcy Court for the:	NORTHERN DISTRICT OF ILL	INOIS		
Case numb	per				
(if known)					☐ Check if this is an
					amended filing
Official F	Form 106E/F				
		ho Have Unsecured	Claims		12/15
Schedule G: Schedule D: left. Attach th name and ca	Executory Contracts and Unexp Creditors Who Have Claims Sec ie Continuation Page to this pag se number (if known).	that could result in a claim. Also lis ired Leases (Official Form 106G). Do ured by Property. If more space is n le. If you have no information to rep	not include eeded, copy t	any creditors with partially secured he Part you need, fill it out, numbe	d claims that are listed in r the entries in the boxes on the
	List All of Your PRIORITY Un				
_ `	creditors have priority unsecure	d claims against you?			
	Go to Part 2.				
☐ Yes.	i-c All - CV NONDDIODIT	N III			
	<u>_ist All of Your NONPRIORIT</u> creditors have nonpriority unsec				
_	rou nave nothing to report in this p	art. Submit this form to the court with y	our other sche	edules.	
Yes.					
unsecure	ed claim, list the creditor separately	aims in the alphabetical order of the y for each claim. For each claim listed, ist the other creditors in Part 3.If you ha	identify what t	ype of claim it is. Do not list claims alr	eady included in Part 1. If more
					Total claim
4.1 Ad	vocate Medical Group	Last 4 digits of acco	unt number	2979	\$330.00
	npriority Creditor's Name D Box 92523	When we the debt :		Santambar 2015	
	icago, IL 60675	When was the debt i	ncurrea?	September 2015	
Nun	mber Street City State Zlp Code	As of the date you fi	le, the claim i	s: Check all that apply	
Wh	o incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	Disputed			
_	At least one of the debtors and and	Па,	TY unsecured	I claim:	
□ deb	Check if this claim is for a comr	_			did 4
	nt he claim subject to offset?	☐ Obligations arising report as priority clain		ration agreement or divorce that you	anot one
	No	<u></u> ' ' '		g plans, and other similar debts	
	Yes	Other. Specify	ledical De	bt	
_		— Other. Specify			

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 19 of 49

Debtor 1 Paloma M Cruz Lopez Case number (if know) 4.2 **Allied Collection Service** Last 4 digits of account number 0701 \$381.00 Nonpriority Creditor's Name 3080 S. Durango Drive When was the debt incurred? January 2012 Suite 208 Las Vegas, NV 89117 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts **Utility bill** ☐ Yes Other. Specify 4.3 **Bank of America** Last 4 digits of account number 0XXX \$3.00 Nonpriority Creditor's Name P.O. Box 982238 When was the debt incurred? September 2010 El Paso, TX 79998 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card Purchase ☐ Yes 4.4 **Best Practices Inpatient Care LTD** \$1,033.00 Last 4 digits of account number 8991 Nonpriority Creditor's Name **PO Box 268** When was the debt incurred? September 2015 Lake Zurich, IL 60047 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical debt ☐ Yes

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 20 of 49

Paloma M Cruz Lopez		Case number (# know)	
Commonwealth Financial Systems	Last 4 digits of account number	21N1	\$395.00
Nonpriority Creditor's Name 245 Main Street Pielcon City, PA 18510	When was the debt incurred?	September 2015	
Dickson City, PA 18519 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	•		
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
☐ Yes	Other Specify Medical De	bt	
Convergent Outsourcing, Inc.	Last 4 digits of account number	4095	\$268.00
Nonpriority Creditor's Name 800 SW 39th St.	When was the debt incurred?	August 2015	
Renton, WA 98057 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	,	or chook an unit apply	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other. Specify Utility Bill		
Credit Management Control	Last 4 digits of account number	8090	\$287.00
Nonpriority Creditor's Name P.O. Box 1654 Groop Box WI 54205	When was the debt incurred?	March 2014	
Green Bay, WI 54305 Number Street City State Zlp Code	As of the date you file, the claim i	is: Check all that apply	
Who incurred the debt? Check one.	- •	• •	
■ Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	■ Other. Specify Utility Bill		

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 21 of 49
Case number (if know)

10	Paloma W Cruz Lopez		Case number (ii know)	40.00
4.8	Credit Protection Association Nonpriority Creditor's Name	Last 4 digits of account number	5194	\$0.00
	13355 Noel Road Suite 2100	When was the debt incurred?	August 2014	
	Dallas, TX 75240		in Ol I was a	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	ng plans, and other similar debts	
	Yes	■ Other. Specify Utility Bill		
4.9	Infinity Healthcare Physicians Nonpriority Creditor's Name	Last 4 digits of account number	0463	\$1,544.00
	111 East Wisconsin Ave	When was the debt incurred?	September 2015	
	Suite 2100			
	Milwaukee, WI 53202 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	7.0 0. 11.0 44.0 , 04 11.0, 11.0 0.41111	er chook an that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharir	og plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical De		
	Li res	Other. Specify	<u></u>	
4.1 0	Integrated Imaging Consultants	Last 4 digits of account number	3904	\$246.00
	Nonpriority Creditor's Name PO Box 95040	When was the debt incurred?	September 2015	
	Chicago, IL 60694	mon was the assembarrou.	Ocpteriber 2010	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed	d alaim.	
	At least one of the debtors and another	Type of NONPRIORITY unsecure ☐ Student loans	d claim:	
	☐ Check if this claim is for a community debt		aration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	manon agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Medical De	bt	

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 22 of 49

Debtor 1 Paloma M Cruz Lopez Case number (if know) 4.1 **Lake County Health Department** 4790 \$114.00 Last 4 digits of account number Nonpriority Creditor's Name 3010 Grand Ave When was the debt incurred? April 2012 Waukegan, IL 60085 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify **Medical Debt** 4.1 Midwest Diagnostic Pathology 8991 \$438.00 Last 4 digits of account number 2 Nonpriority Creditor's Name **PO Box 578** When was the debt incurred? September 2015 Park Ridge, IL 60068 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Medical Debt ☐ Yes 4.1 Rami K Taha MD 4663 \$558.00 Last 4 digits of account number 3 Nonpriority Creditor's Name 1880 W. Winchester When was the debt incurred? September 2015 Suite 106 Libertyville, IL 60048 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ■ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No

☐ Yes

■ Other. Specify Medical Debt

Document Page 23 of 49 Debtor 1 Paloma M Cruz Lopez Case number (if know) 4.1 State Collection Service Inc. 0220 \$267.00 Last 4 digits of account number Nonpriority Creditor's Name 2509 S. Stoughton Road When was the debt incurred? August 2012 Madison, WI 53716 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Medical Debt ☐ Yes 4.1 T. L. Thompson and Associates 2743 \$27,727.75 Last 4 digits of account number 5 Nonpriority Creditor's Name 330 Oaks Trail When was the debt incurred? October 18, 2012 Suite 200 Garland, TX 75043 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims lacksquare Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Car accident without insurance ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Illinois Secretary of State Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 17 North State Street Part 2: Creditors with Nonpriority Unsecured Claims 10th Floor Chicago, IL 60602 Last 4 digits of account number 3753 On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Infinity Healthcare Physicians Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 111 East Wisconsin Ave ■ Part 2: Creditors with Nonpriority Unsecured Claims **Suite 2100** Milwaukee, WI 53202 Last 4 digits of account number 21N1 Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Kemper Preferred** Line 4.15 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 12926 Gran Bay Parkway West

Name and Address

Jacksonville, FL 32258

■ Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number IL12

On which entry in Part 1 or Part 2 did you list the original creditor?

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 24 of 49

Debtor 1 Paloma M Cruz Lopez		Case number (if know)
Malcom S. Gerald and Associates Inc	Line 4.1 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims
300 S. Michigan Ave Suite 600 Chicago, IL 60604		■ Part 2: Creditors with Nonphority Onsecured Claims
Cilicago, in 00004	Last 4 digits of account number	9037
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Nationwide Credit Corp.	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
PO Box 1022 Wixom, MI 48393		■ Part 2: Creditors with Nonpriority Unsecured Claims
WIXOIII, WII 40333	Last 4 digits of account number	a826
Name and Address	On which entry in Part 1 or Part 2 or	did you list the original creditor?
Robert Ludwig	Line 4.15 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims
21095 W. Andover Drive Mundelein, IL 60060		■ Part 2: Creditors with Nonpriority Unsecured Claims
,	Last 4 digits of account number	

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
	·			
				Total Claim
6f.	Student loans	6f.	\$	0.00
6g.	Obligations arising out of a separation agreement or divorce that			0.00
	you did not report as priority claims	-	· —	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$	33,591.75
6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	33,591.75
	6b. 6c. 6d. 6e. 6f. 6g. 6h.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. 6d. 6d. 6d. 6d. 6d. 6d. 6d. 6e.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. \$ 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$ 6b. \$ 6c. \$ 6c. \$ 6d. \$ 6d. \$ 6e. \$ 6e. \$ 6f. \$ 6g. \$ 6g. \$ 6g. \$ 6g. \$ 6g. \$ 6h. \$ 6h. \$ 6h. \$ 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

			111 1 auc 23 01 4 3	
Fill in this infor	mation to identify your	case:		
Debtor 1	Paloma M Cruz L	opez		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with Name, Number	whom you have the , Street, City, State and ZIP (contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.2	•				
	Name				_
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				_
	Number	Street			_
	City		State	ZIP Code	

		Docume	nt Page 26 d	of 49	
Fill in this	s information to identify your	case:			
Debtor 1	Paloma M Cruz L	onez			
Dobto. 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, fi	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case num	shor				
(if known)				☐ Check if this is	an
				amended filing	
				<u> </u>	
Officia	I Form 106H				
Sched	dule H: Your Cod	ebtors			12/15
your name	e and case number (if known you have any codebtors? (If). Answer every question.	-	e o this page. On the top of any Additional Pages as a codebtor.	
■ No					
☐ Ye	S				
	thin the last 8 years, have you na, California, Idaho, Louisiana			ry? (Community property states and territories incluington, and Wisconsin.)	ıde
■ No	. Go to line 3.				
`	s. Did your spouse, former spo	use, or legal equivalent live	with you at the time?		
)	, 9			
in lin Form	e 2 again as a codebtor only	if that person is a guarant	or or cosigner. Make	r if your spouse is filing with you. List the perso sure you have listed the creditor on Schedule D 16G). Use Schedule D, Schedule E/F, or Schedul	Official
	Column 1: Your codebtor	ID 0 . I		Column 2: The creditor to whom you owe the	he debt
	Name, Number, Street, City, State and Z	IP Code		Check all schedules that apply:	
3.1				☐ Schedule D. line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		
2.0				Cohodulo D. lino	
3.2	Name			☐ Schedule D, line	
				☐ Schedule E/F, line ☐ Schedule G, line	
	Nearless				
	Number Street	State	ZIP Code		

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 27 of 49

Fill	in this information to identify yo	ur case:							
Del	btor 1 Paloma	M Cruz Lopez			_				
	btor 2 ouse, if filing)				_				
Uni	ited States Bankruptcy Court fo	the: NORTHERN DISTRIC	CT OF ILLINOIS						
(If ki	se number nown)		-				ded filing nent showir	ng postpetition ollowing date:	
<u>O</u>	fficial Form 106l					MM / DD/	YYYY		
S	chedule I: Your II	ncome							12/15
sup spo atta	as complete and accurate as oplying correct information. If buse. If you are separated and ich a separate sheet to this for the Describe Employment 1:	you are married and not fili your spouse is not filing w rm. On the top of any additi	ng jointly, and your ith you, do not inclu	spouse i ude infori	is liv mati	ing with you, inc on about your s	clude infor	mation about ore space is	your needed,
1.	Fill in your employment information.		Debtor 1			Debtor	2 or non-f	iling spouse	
	If you have more than one job), Employment status	■ Employed			☐ Emp	oloyed		
	attach a separate page with information about additional employers.	Employment status Occupation	☐ Not employed			☐ Not	employed		
	Include part-time, seasonal, c self-employed work.	•	Dollar Tree						
	Occupation may include stud or homemaker, if it applies.	ent Employer's address	250 Hawthorn \ Commons Vernon Hills, IL	•					
		How long employed t	here? 2 mont	thss					
Pai	rt 2: Give Details About	Monthly Income							
	imate monthly income as of the use unless you are separated.	ne date you file this form. If	you have nothing to ı	report for	any	line, write \$0 in th	ie space. In	clude your no	n-filing
	ou or your non-filing spouse hav re space, attach a separate shee		ombine the information	on for all e	empl	oyers for that pers	son on the I	ines below. If	you need
						For Debtor 1		btor 2 or ing spouse	
2.	List monthly gross wages, deductions). If not paid mont			2.	\$	248.37	<u> </u>	N/A	
3.	Estimate and list monthly o	vertime pay.		3.	+\$	0.00	+\$	N/A	
4.	Calculate gross Income. Ad	dd line 2 + line 3.		4.	\$	248.37	\$	N/A	

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 28 of 49

Deb	tor 1	Paloma M Cruz Lopez		C	ase number (if known) .				
				1	For Debtor 1			Debtor filing s	2 or spouse	
	Сор	y line 4 here	4.	,	\$ 248.37	7	\$		N/A	
5.	List	all payroll deductions:								
	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans Required repayments of retirement fund loans Insurance Domestic support obligations Union dues Other deductions. Specify:	5a. 5b. 5c. 5d. 5e. 5f. 5g. 5h.		\$ 19.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00))))	\$ \$ \$ \$ \$ \$ \$		N/A N/A N/A N/A N/A N/A N/A	
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	_ 511. 6.	. ' `	·	_	υ • \$		N/A	
7.		culate total monthly take-home pay. Subtract line 6 from line 4.	7.	9		_	\$		N/A	
8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.		\$ 0.00	_	\$		N/A	
	8b.	Interest and dividends	8b.		\$ 0.00		\$—		N/A	
	8d. 8e. 8f.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. Unemployment compensation Social Security Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8c. 8d. 8e.	. 9	\$ 0.00 \$ 0.00 \$ 0.00)	\$ \$ 		N/A N/A N/A	
		Specify: Food Stamps/Link Card	_ 8f.	5	\$194.00)_	\$		N/A	
	8g.	Pension or retirement income	8g.		\$ 0.00	_	\$		N/A	
9.	8h.	Other monthly income. Specify: all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	_ 8h. 9.	.+ `	194.00	_	* \$ \$		N/A N/A	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	423.37 +	\$_		N/A	= \$	423.37
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe					chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines						12.	\$	423.37
13.	Do y	you expect an increase or decrease within the year after you file this form' No. Yes Explain:	?						Combine	

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 29 of 49

Fill in this	information to identify yo	our case:					
Debtor 1					Cho	ck if this is:	
Debior	Paloma M C	ruz Lopez				An amended filing	
Debtor 2 (Spouse, if	filing)					A supplement show 13 expenses as of	ving postpetition chapter
	0,					13 expenses as or	the following date.
United State	es Bankruptcy Court for the	: NORTHER	N DISTRICT OF ILLING	OIS		MM / DD / YYYY	
Case numb (If known)	er						
Officia	al Form 106J						
Sche	dule J: Your	Expense	es				12/1
information	nplete and accurate as on. If more space is ne if known). Answer eve	eded, attach a					
Part 1:	Describe Your House	ehold					
1. Is th	is a joint case?						
	o. Go to line 2.						
LI Y	es. Does Debtor 2 live	in a separate	household?				
	☐ No ☐ Yes Debtor 2 mus	st file Official F	orm 106J-2, Expenses	for Separate House	ehold of Deb	ntor 2	
0 D		_	om 1000 2, 2xpon000	ro, coparato riodo	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	7.01 2.	
•	ou have dependents?	□ No					
Do n Debt	ot list Debtor 1 and or 2.	MAS Y AS	l out this information for ch dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
Do n	ot state the						□ No
depe	ndents names.			Son		_ 3	Yes
				Nices		5	□ No
				Niece			■ Yes □ No
							☐ Yes
							□ No
							☐ Yes
expe	our expenses include enses of people other t self and your depende						
	as of a date after the	our bankrupto	cy filing date unless y				pter 13 case to report f the form and fill in the
the value	xpenses paid for with of such assistance an Form 106I.)					Your exp	enses
	rental or home owners nents and any rent for th			nclude first mortgage	e 4. :	\$	200.00
If no	t included in line 4:						
4a.	Real estate taxes				4a.	\$	0.00
4b.	Property, homeowner's	s, or renter's in	surance		4b.	\$	0.00
4c.	Home maintenance, re				4c.	·	0.00
4d.	Homeowner's associational mortgage payme				4d. 5	·	0.00

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 30 of 49

Debtor '	Paloma M Cruz Lopez	Case num	ber (if known)	
1 14	ilities:			
6. Ut i 6a		6a.	\$	35.00
6b		6b.	\$	40.00
6c.		6c.	·	
			·	50.00
6d		6d.	·	0.00
	od and housekeeping supplies	7.	·	400.00
Ch	ildcare and children's education costs	8.	\$	250.00
Cle	othing, laundry, and dry cleaning	9.	\$	50.00
). Pe	rsonal care products and services	10.	\$	0.00
. Ме	edical and dental expenses	11.	\$	0.00
	ansportation. Include gas, maintenance, bus or train fare.	10	Ф.	0.00
	not include car payments.	12.		
	tertainment, clubs, recreation, newspapers, magazines, and books	13.	·	0.00
. Ch	aritable contributions and religious donations	14.	\$	0.00
	surance.			
	not include insurance deducted from your pay or included in lines 4 or 20.		•	
	a. Life insurance	15a.	·	0.00
15	b. Health insurance	15b.	\$	0.00
15	c. Vehicle insurance	15c.	\$	55.00
15	d. Other insurance. Specify:	15d.	\$	0.00
. Ta	xes. Do not include taxes deducted from your pay or included in lines 4 or 20.			
	ecify:	16.	\$	0.00
	stallment or lease payments:	170	¢.	0.00
	a. Car payments for Vehicle 1	17a.	·	0.00
	b. Car payments for Vehicle 2	17b.	·	0.00
	c. Other. Specify:	17c.		0.00
	d. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report as		\$	0.00
	ducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). her payments you make to support others who do not live with you.	10.	\$	0.00
	ecify:	19.	Ψ	0.00
	berry her real property expenses not included in lines 4 or 5 of this form or on <i>Sch</i> o		ur Incomo	
	a. Mortgages on other property	20a.		0.00
	b. Real estate taxes	20b.	·	0.00
	c. Property, homeowner's, or renter's insurance	20c.		0.00
	d. Maintenance, repair, and upkeep expenses	20d.		0.00
20	e. Homeowner's association or condominium dues	20e.	\$	0.00
. Ot	her: Specify:	21.	+\$	0.00
). Ca	lculate your monthly expenses			
	a. Add lines 4 through 21.		\$	1,080.00
	ŭ		\$	1,000.00
	b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		·	
22	c. Add line 22a and 22b. The result is your monthly expenses.		\$	1,080.00
3. C a	Iculate your monthly net income.			
	a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	423.37
	b. Copy your monthly expenses from line 22c above.	23b.	·	1,080.00
20	5. 55p, 75s. Hollan, 5xportoso Holli into 220 abovo.	200.		1,000.00
23	c. Subtract your monthly expenses from your monthly income.			
	The result is your monthly net income.	23c.	\$	-656.63
4 D -	valuevant on increase as decrease in the same as within the same of the same	au fila fh'-	forms	
	you expect an increase or decrease in your expenses within the year after your example, do you expect to finish paying for your car loan within the year or do you expect you			or decrease because o
	dification to the terms of your mortgage?	. mortgage	oaymont to morease	, or accidase pecause (
	No.			
	Yes. Explain here:			
	165. LAPIGIII HEIG.			

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 31 of 49

Fill in thi	is information to identify your	case.			
Debtor 1					
Deptor i	Paloma M Cruz L First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, f	filing) First Name	Middle Name	Last Name		
United St	tates Bankruptcy Court for the:	NORTHERN DISTRICT	OF ILLINOIS		
Case nur	mber				
(if known)					☐ Check if this is an
					amended filing
Officia	I Form 106Dec				
			Dali (ania Oa	la a desta a	
Deci	aration About a	<u>an individual</u>	Deptor's Sc	nedules	12/15
lf turn ma	rried people are filing togethe	w bath are equally reams		eat information	
ii two iiia	irried people are filling togethe	i, both are equally respo	maible for supplying con	ect illiorniation.	
	t file this form whenever you f				
obtaining	money or property by fraud i both. 18 U.S.C. §§ 152, 1341,	n connection with a bank	kruptcy case can result ir	n fines up to \$250,000, o	or imprisonment for up to 20
years, or	botti. 10 0.5.0. gg 152, 1541,	1515, and 5571.			
	Sign Below				
Did	you pay or agree to pay some	eone who is NOT an atto	rney to help you fill out b	ankruptcy forms?	
_	No				
_					
	Yes. Name of person				otcy Petition Preparer's Notice, ad Signature (Official Form 119)
				Declaration, an	a dignature (Ginelai i Gini 113)
	er penalty of perjury, I declare they are true and correct.	that I have read the sum	mary and schedules filed	d with this declaration a	and
	•		.,		
	/s/ Paloma M Cruz Lopez		XX	Dahta O	
	Paloma M Cruz Lopez Signature of Debtor 1		Signature of I	Dentol 7	
	organicate of Debtor 1				
	Date March 31, 2016		Date		

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 32 of 49

Debtor 1	Paloma M Cruz L	opez		
Dalata a O	First Name	Middle Name	Last Name	
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	NORTHERN DISTRICT OF ILLI	NOIS	
Case number (if known)				☐ Check if this is an amended filing
Be as complete	t of Financial A and accurate as possib more space is needed, a	ole. If two married people are filir attach a separate sheet to this fo	s Filing for Bankruptcy g together, both are equally respons rm. On the top of any additional page	ible for supplying correct
umber (if knov	wn). Answer every ques		Refere	
Part 1: Givo	Dotails About Your Mar	ital Status and Whore Vou Lived		
		ital Status and Where You Lived	Belofe	
. What is yo	ur current marital status		Bolote	
. What is yo Marrie Not m	ur current marital status d arried			
. What is yo Marrie Not marrie During the	ur current marital status ed arried last 3 years, have you li	5?	you live now?	
. What is yo Marrie Not m. During the No Yes. L	ur current marital status ed arried last 3 years, have you li	ived anywhere other than where	you live now?	Dates Debtor 2 lived there
. What is yo Marrie Not mar. During the No Yes. L Debtor 1 F	ur current marital status ed arried last 3 years, have you li ist all of the places you liv	ived anywhere other than where yed in the last 3 years. Do not inclu Dates Debtor 1	you live now? de where you live now.	
. What is yo Marrie Not m. During the No Yes. L Debtor 1 F 366 Taylo Vernon F	ur current marital status ad arried last 3 years, have you li ist all of the places you liv Prior Address: or Street dills, IL 60061	ived anywhere other than where red in the last 3 years. Do not inclu Dates Debtor 1 lived there From-To: 4/1/2015-3/31/201	you live now? de where you live now. Debtor 2 Prior Address:	lived there ☐ Same as Debtor 1

Page 33 of 49
Case number (if known) Document Debtor 1 Paloma M Cruz Lopez

Pa	rt 2	Ехр	lain the Sou	irces of You	r Income			
4.	Fill in	the to	otal amount	of income yo	nployment or from operatin u received from all jobs and a have income that you receive	all businesses, including part		ndar years?
		No						
	_		Fill in the det	ails.				
					Debtor 1		Debtor 2	
					Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			1 of curren iled for ban		■ Wages, commissions, bonuses, tips	\$1,371.28	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
			dar year: December 3	31, 2015)	■ Wages, commissions, bonuses, tips	\$14,534.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
			lar year bef December 3		■ Wages, commissions, bonuses, tips	\$18,000.00	☐ Wages, commissions, bonuses, tips	
					☐ Operating a business		☐ Operating a business	
	= 1	No	ource and th	•	me from each source separa	tely. Do not include income t	nat you listed in line 4.	
					Debtor 1		Debtor 2	
					Sources of income Describe below	Gross income (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
Pa	rt 3:	List	Certain Pay	ments You	Made Before You Filed for	Bankruptcy		
6.	_	e ither No.	Neither De individual p	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre	personal, family, or househoure you filed for bankruptcy, di. Each creditor to whom you paieditor. Do not include paymer	umer debts. Consumer debts Id purpose." d you pay any creditor a tota id a total of \$6,225* or more ints for domestic support oblig	s are defined in 11 U.S.C. § 10 I of \$6,225* or more? In one or more payments and a ations, such as child support a	he total amount you
			* Subject to		payments to an attorney for the condition on 4/01/16 and every 3 year		or after the date of adjustmen	t.
		Yes.			r both have primarily consure you filed for bankruptcy, di		I of \$600 or more?	
			■ No.	Go to line 7				
			□ Yes	List below e	each creditor to whom you pai		I the total amount you paid the port and alimony. Also, do not	

Debtor 1 Paloma M Cruz Lopez

Document Page 34 of 49

Case number (if known)

	Creditor's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Was this pa	yment for
7.	Within 1 year before you filed for bankrupto Insiders include your relatives; any general part of which you are an officer, director, person in a business you operate as a sole proprietor. 11 alimony.	tners; relatives of any gen control, or owner of 20% o	eral partners; partners partners of their votin	erships of which you g securities; and ar	u are a genera ny managing a	ll partner; corporations gent, including one for
	■ No□ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankruptoinsider? Include payments on debts guaranteed or cosi No Yes. List all payments to an insider		ments or transfer a	any property on ac	ccount of a de	ebt that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment itor's name
Par	t 4: Identify Legal Actions, Repossession	s. and Foreclosures				
 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or comodifications, and contract disputes. No Yes. Fill in the details. 						
	Case title Case number	Nature of the case	Court or agency		Status of the	e case
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ■ No □ Yes. Fill in the information below.		erty repossessed, f	oreclosed, garnis	hed, attached	l, seized, or levied?
	Creditor Name and Address	Describe the Property Explain what happened	I	Date		Value of the property
11.						mounts from your
	Creditor Name and Address	Describe the action the	creditor took	Date a	action was	Amount
12.	Within 1 year before you filed for bankrupto court-appointed receiver, a custodian, or an No Yes		erty in the possess			fit of creditors, a

Page 35 of 49
Case number (if known) Document Debtor 1 Paloma M Cruz Lopez

Pa	rt 5: List Certain Gifts and Contribution	ns								
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift.									
	Gifts with a total value of more than \$6 per person	500	Describe the gifts	Dates you gave the gifts	Value					
	Person to Whom You Gave the Gift an Address:	d								
14.	Within 2 years before you filed for bank ■ No □ Yes. Fill in the details for each gift or		did you give any gifts or contributions with a totation.	ıl value of more than	\$600 to any charity					
	Gifts or contributions to charities that more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Co	total	Describe what you contributed	Dates you contributed	Value					
Pa	rt 6: List Certain Losses									
15.	Within 1 year before you filed for bankr or gambling? No Yes. Fill in the details.	uptcy or	r since you filed for bankruptcy, did you lose anyl	thing because of the	ft, fire, other disaster,					
	Describe the property you lost and how the loss occurred	ribe any insurance coverage for the loss e the amount that insurance has paid. List pending nce claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost						
Pa	rt 7: List Certain Payments or Transfe	rs								
16.	consulted about seeking bankruptcy or	r prepari	lid you or anyone else acting on your behalf pay or ing a bankruptcy petition? rs, or credit counseling agencies for services required		rty to anyone you					
	Yes. Fill in the details.									
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not	You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment					
	Albarran Law Offices 204 N. West Street Waukegan, IL 60085 albarranlaw@yahoo.com		Attorney Fees	2-16-16	\$865.00					
	Abacus Credit Counseling Suite 226 Encino, CA 91316		Credit counseling course	2-29-16	\$25.00					
17.		editors o	lid you or anyone else acting on your behalf pay or or to make payments to your creditors? ted on line 16.	or transfer any prope	rty to anyone who					
	■ No									
	Yes. Fill in the details. Person Who Was Paid		Description and value of any property	Date payment	Amount of					
	Address		transferred	or transfer was made	payment					

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Page 36 of 49
Case number (if known) Document

Debtor 1 Paloma M Cruz Lopez

18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details.					
	Person Who Received Transfer Address Person's relationship to you	Description and v property transferr		paymen	e any property or ts received or debts exchange	Date transfer was made
19.						
	Name of trust	Description and value of the propert			rred	Date Transfer was made
Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units						
20.	Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No Yes. Fill in the details.					
		•		c n	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Address (Number, Street, City,		e contents	Do you still have it?
22.	Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or h to it? Address (Number, State and ZIP Code)		Describe the contents		Do you still have it?
Par	t 9: Identify Property You Hold or Control fo	or Someone Else				
23.	Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property		Value
Part 10: Give Details About Environmental Information						
For	the purpose of Part 10, the following definition	ns apply:				

Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Page 37 of 49
Case number (if known) Document

Debtor 1 Paloma M Cruz Lopez

> toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.

- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance,

	hazardous material, pollutant, contaminant, or similar term.						
rt a	III notices, releases, and proceedings tha	at you know about, regardless of when	the	y occurred.			
Has	las any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?						
	■ No.						
	Yes. Fill in the details.						
		Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice		
Hav	re you notified any governmental unit of	any release of hazardous material?					
	No Yes. Fill in the details.						
		Governmental unit Address (Number, Street, City, State and ZIP Code)	i	Environmental law, if you know it	Date of notice		
Hav	Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.						
■ No □ Yes. Fill in the details.							
		Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case		
11:	Give Details About Your Business or (Connections to Any Business					
Wit	hin 4 vears before vou filed for bankrupt	cv. did vou own a business or have an	v of	the following connections to any	business?		
	☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time						
☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
☐ A partner in a partnership							
□ An officer, director, or managing executive of a corporation							
☐ An owner of at least 5% of the voting or equity securities of a corporation							
No. None of the above applies. Go to Part 12.							
Business Name I Address		Describe the nature of the business	Employer Identification number				
		Name of accountant or bookkeeper		Dates business existed			
Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.							
	No						
	Yes. Fill in the details below.						
Ad	dress	Date Issued					
	Has Nad Have Dadden Nad Have Dadden Nad Have Dadden Nad	Has any governmental unit notified you that No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you notified any governmental unit of a law you notified any governmental unit of a law yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Have you been a party in any judicial or adm law you been a party in any judicial or adm law yes. Fill in the details. Case Title Case Number 11: Give Details About Your Business or (Within 4 years before you filed for bankrupte law A sole proprietor or self-employed in law A member of a limited liability computed A partner in a partnership law An officer, director, or managing examples and officer, director, or managing examples. No. None of the above applies. Go to Place Yes. Check all that apply above and fill Business Name Address (Number, Street, City, State and ZIP Code) Within 2 years before you filed for bankrupter institutions, creditors, or other parties.	No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Ame Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, A member of a limited liability company (LLC) or limited liability partnershi A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business Business Name Address (Number, Street, City, State and ZIP Code) No No Yes. Fill in the details below. Name Address Date Issued	No No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Adve you been a party in any judicial or administrative proceeding under any environs No Yes. Fill in the details. Case Title Case Number Case Number Case Number Case Number Address (Number, Street, City, State and ZIP Code) A sole proprietor or self-employed in a trade, profession, or other activity, eith A member of a limited liability company (LLC) or limited liability partnership (L A partner in a partnership An officer, director, or managing executive of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Business Name Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details below for each business. Name of accountant or bookkeeper Within 2 years before you filed for bankruptcy, did you give a financial statement to an astitutions, creditors, or other parties. No Yes. Fill in the details below. Name Address	No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Name of site Address (Number, Street, City, State and ZIP Code) No Yes. Fill in the details. Case Title Court or agency Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Address (Number, Street, City, State and ZIP Code) Name Name		

Part 12: Sign Below

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6 Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Page 38 of 49
Case number (if known) Document

Debtor 1 Paloma M Cruz Lopez

are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Pa	aloma M Cruz Lop	∂ Z
Paloma M Cruz Lopez Signature of Debtor 1		Signature of Debtor 2
Date	March 31, 2016	Date
Did yo	u attach additional լ	pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?
No		
☐ Yes	3	
Did yo	u pay or agree to pa	y someone who is not an attorney to help you fill out bankruptcy forms?
No		
☐ Yes	. Name of Person	. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 39 of 49

Fill in this infor	rmation to identify your ca	ase.		1
Debtor 1	Paloma M Cruz Lo			
Debtor 1	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DIST	RICT OF ILLINOIS	
Case number				
(if known)				☐ Check if this is an
,				amended filing
creditors have least you have least fou must file the whicher on the fitwo married pages as complete	ever is earlier, unless the form people are filing together ind date the form.	r property, or d the lease has no thin 30 days after y court extends the in a joint case, both		he creditors and lessors you list information. Both debtors must
l. For any credit			Creditors Who Have Claims Secured by Proper	ty (Official Form 106D), fill in the
information b Identify the cr	pelow. reditor and the property that	at is collateral	What do you intend to do with the property the secures a debt?	at Did you claim the property as exempt on Schedule C
Creditor's			☐ Surrender the property.	□No
name:			☐ Retain the property and redeem it.	
			☐ Retain the property and enter into a	☐ Yes
Description of	t		Reaffirmation Agreement.	
property			☐ Retain the property and [explain]:	
securing debt	T.			
Creditor's			-	_
			☐ Surrender the property	— П No
name:			☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
			☐ Retain the property and redeem it.	□ No □ Yes
	ıf			

Official Form 108

Creditor's

securing debt:

Description of

securing debt:

Creditor's

name:

property

Statement of Intention for Individuals Filing Under Chapter 7

 \square Surrender the property.

☐ Surrender the property.

 $\hfill\square$ Retain the property and redeem it.

 $\hfill\square$ Retain the property and enter into a

Reaffirmation Agreement.

☐ Retain the property and [explain]:

□ No

☐ Yes

☐ No

Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 40 of 49

Debtor 1	Paloma M Cruz Lopez	Case number (if known)	
name:		☐ Retain the property and redeem it.☐ Retain the property and enter into a	□Yes
Descrip	otion of	Reaffirmation Agreement.	
propert securin	ty ng debt:	☐ Retain the property and [explain]:	-
For any unit in the info	ormation below. Do not list real estate le	y Leases you listed in Schedule G: Executory Contracts and Unexpired eases. Unexpired leases are leases that are still in effect; the y lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leas	ses	Will the lease be assumed?
Lessor's r	name:		□ No
Description Property:	on of leased		—
r roporty.			☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r	name:		□ No
Description Property:	on of leased		
r roperty.			☐ Yes
Lessor's r	name: on of leased		□ No
Property:			☐ Yes
Lessor's r			□ No
Description Property:	on of leased		☐ Yes
Lessor's r Description	name: on of leased		□ No
Property:			☐ Yes
Lessor's r			□ No
Property:	on of leased		☐ Yes
Part 3:	Sign Below		
Under per		dicated my intention about any property of my estate that sec	ures a debt and any personal
	Paloma M Cruz Lopez	X	
	oma M Cruz Lopez ature of Debtor 1	Signature of Debtor 2	
Date	March 31, 2016	Date	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit
AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Case 16-11190 Doc 1 Filed 03/31/16 Entered 03/31/16 16:11:42 Desc Main Document Page 45 of 49

B2030 (Form 2030) (12/15)

United States Bankruptcy CourtNorthern District of Illinois

In re	Paloma M Cruz Lopez		Case No.	
	·	Debtor(s)	Chapter	7
	DISCLOSURE OF COMPEN	NSATION OF ATTOI	RNEY FOR DE	CBTOR(S)
c	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(compensation paid to me within one year before the filing rendered on behalf of the debtor(s) in contemplation of	g of the petition in bankruptcy,	or agreed to be paid	to me, for services rendered or to
	For legal services, I have agreed to accept		\$	865.00
	Prior to the filing of this statement I have received			865.00
	Balance Due		\$	0.00
2. \$	335.00 of the filing fee has been paid.			
3. T	The source of the compensation paid to me was:			
	■ Debtor □ Other (specify):			
4. T	The source of compensation to be paid to me is:			
	■ Debtor □ Other (specify):			
5. I	I have not agreed to share the above-disclosed compo	ensation with any other person	unless they are memb	pers and associates of my law firm.
[☐ I have agreed to share the above-disclosed compensa copy of the agreement, together with a list of the name			
6. I	in return for the above-disclosed fee, I have agreed to re	nder legal service for all aspect	s of the bankruptcy c	ase, including:
b c	Analysis of the debtor's financial situation, and rende. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credito. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and application 522(f)(2)(A) for avoidance of liens on hou	ement of affairs and plan which its and confirmation hearing, ar educe to market value; exe ins as needed; preparation	may be required; and any adjourned hear emption planning;	rings thereof;
7. E	By agreement with the debtor(s), the above-disclosed fee Representation of the debtors in any dis any other adversary proceeding.			es, relief from stay actions or
		CERTIFICATION		
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement for	payment to me for re	epresentation of the debtor(s) in
M	arch 31, 2016	/s/ Brittany Helfe	,	
	ate	Brittany Helfer 63 Signature of Attorne Albarran Law Off 204 N. West Stree Waukegan, IL 600 874-782-1111 Fa albarranlaw@yah	811064 y ices et 085 x: 847-782-1916	
		Name of law firm		

United States Bankruptcy Court Northern District of Illinois

In re	Paloma M Cruz Lopez		Case No.	
		Debtor(s)	Chapter 7	
	VI	ERIFICATION OF CREDITOR M	ATRIX	
		Number of	Creditors:	21
	The above-named Debtor(s (our) knowledge.) hereby verifies that the list of credite	ors is true and correct to	the best of my
Date:	March 31, 2016	/s/ Paloma M Cruz Lopez Paloma M Cruz Lopez Signature of Debtor		

Advocate Medical Group PO Box 92523 Chicago, IL 60675

Allied Collection Service 3080 S. Durango Drive Suite 208 Las Vegas, NV 89117

Bank of America P.O. Box 982238 El Paso, TX 79998

Best Practices Inpatient Care LTD PO Box 268 Lake Zurich, IL 60047

Commonwealth Financial Systems 245 Main Street Dickson City, PA 18519

Convergent Outsourcing, Inc. 800 SW 39th St. Renton, WA 98057

Credit Management Control P.O. Box 1654 Green Bay, WI 54305

Credit Protection Association 13355 Noel Road Suite 2100 Dallas, TX 75240

Illinois Secretary of State 17 North State Street 10th Floor Chicago, IL 60602

Infinity Healthcare Physicians 111 East Wisconsin Ave Suite 2100 Milwaukee, WI 53202 Infinity Healthcare Physicians 111 East Wisconsin Ave Suite 2100 Milwaukee, WI 53202

Integrated Imaging Consultants PO Box 95040 Chicago, IL 60694

Kemper Preferred 12926 Gran Bay Parkway West Jacksonville, FL 32258

Lake County Health Department 3010 Grand Ave Waukegan, IL 60085

Malcom S. Gerald and Associates Inc 300 S. Michigan Ave Suite 600 Chicago, IL 60604

Midwest Diagnostic Pathology PO Box 578 Park Ridge, IL 60068

Nationwide Credit Corp. PO Box 1022 Wixom, MI 48393

Rami K Taha MD 1880 W. Winchester Suite 106 Libertyville, IL 60048

Robert Ludwig 21095 W. Andover Drive Mundelein, IL 60060

State Collection Service Inc. 2509 S. Stoughton Road Madison, WI 53716

T. L. Thompson and Associates 330 Oaks Trail Suite 200 Garland, TX 75043